



THE Minnesota News

March 27 | 9:30am - 6pm

Insurance Day 2014 *at the Capitol*

FREE



Insurance Day 2014
at the Capitol

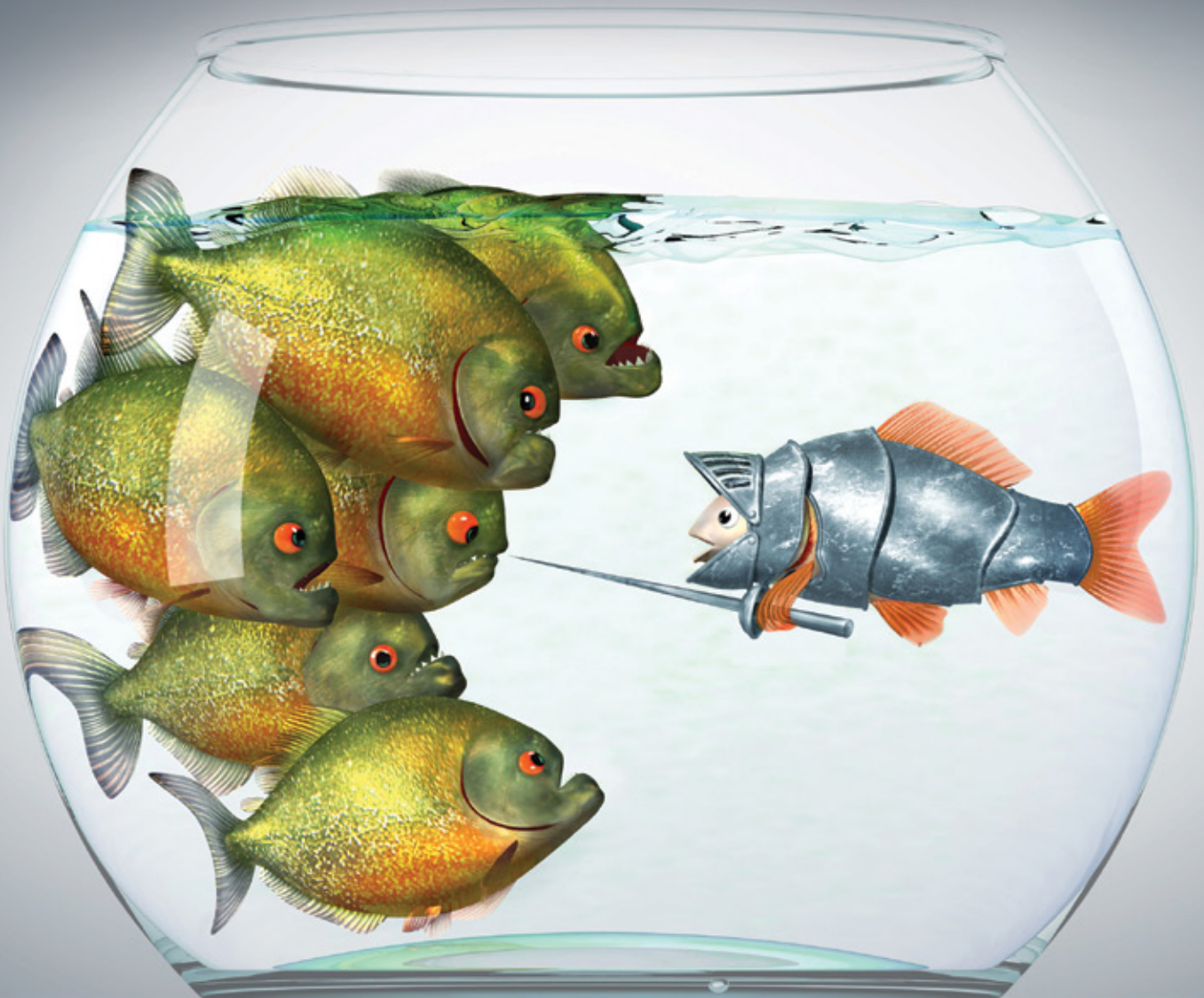
Guest Speakers

Tina Flint Smith, Candidate for Lieutenant Governor and former Chief of Staff for Governor Mark Dayton

Tom Hauser, Chief Political Reporter for KSTP News



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March 27, 2014
Insurance Day 2014
at the Capitol
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Olympics

I was watching the Winter Olympics, specifically Cross Country skiing, when they started talking about the team that helps get these athletes ready to compete. They receive help from the person that waxes their skis, their nutritionist, strength coach, ski coach, massage therapist, etc. These athletes would not be out there competing at such a high level if they tried to do it themselves.

This made me think about how this relates to our own agencies. There may be times when we think we could "go it alone" and run our agencies by ourselves, but in actuality that is probably not true. If we didn't have the help from our producers and support staff, we probably wouldn't grow our agencies very fast and would be swamped doing the little things our support staffs does that we forget about.

In the past we have talked about how we need to get young agents into our industry. This brings me to another point regarding support staff. We are coming to a critical point in regards to our own staff. We have a lot of seasoned employees who are on the verge of retiring, or will in the next five to ten years and we will need to replace them.

"With Change comes Opportunity" with support staff starting to roll over this gives us a great opportunity for new employees. Maybe you have met with some potential hires that want to be producers or account managers, but don't have enough experience (just graduated from college, starting second career). Maybe you could start them off as a customer service representative to help them get their feet wet and help grow into a position that they want. After working in the agency a little they may surprise you by telling you they want another roll in the agency that they didn't even think of prior to working there.

There are plenty of good people out there that can succeed if we give them a chance. You never know the person that someday runs your agency may be processing mortgage changes for you today.

When you are thinking about your support staff, this may be a good time to thank them for all the hard work they do for the agency. I think we sometimes get too caught up in our schedules and meetings and forget that we couldn't attend these meeting without our support staff looking out for our agencies.

To the support staff in agencies, "Thank You", from me, for helping keep the independent agencies strong and professional.

Chad Bjugan
Richfield State Insurance



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On behalf of the board of directors of the MIIAB I would like to thank State Auto and their staff for their commitment to their agents in Minnesota moving them to www.TrustedChoice.com



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- The prospect demographics have been really encouraging. **Most of the visitors are exactly the customers you want** - married, over 35 years old, with homes and multiple cars and indicating they are looking for a higher limits option 50% of the time.
- In just the last 65 days, **more than 1,200 agencies like yours have elected to participate in the Advantage monthly subscription**. This investment of just \$39 per month greatly improves the odds of being found and chosen by insurance buyers. Many have seen the investment pay off within days of signing up.

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Vice President, Sales



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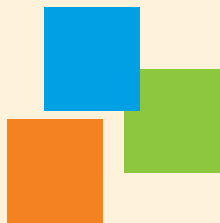
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consistently outperforms other carriers in ease of doing business.

Our company is proud to support charitable causes. The West Bend Mutual Insurance Company Charitable Fund, established in 1995, has provided more than \$3.8 million to organizations that include the United Way, American Cancer Society, and American Red Cross.

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Tools that Enhance Claims Information & Efficiency for Independent Agents & Brokers

By Donna J. LaGoy AIT, ACE

This article discusses technology tools that have been introduced to permit independent agents and brokers to serve their clients more promptly and effectively in claims situations. Claims download, real-time claim inquiry, real-time filing of First Notice of Loss (FNOL), real-time requests for loss runs, and Activity Notes all have great promise to make agency workflows more efficient.

Most of these new capabilities have already been introduced by some carriers, but we need to see much broader usage. The agents will play the critical role in making this happen, but first they need to be convinced that these new technologies will materially improve their workflows. This article seeks to make that case.

Claims Download

One of the most exciting new opportunities is for the automatic downloading of new claims and claims status information into agency management systems. An ACORD standard has been put in place for claims download, and several vendors and carriers have begun to implement the new capability.

However, an agent might ask: “How exactly will claims download benefit me? I already have claim inquiry available via carrier websites or through my agency management system using real-time inquiry.” Or, the agent might say: “Why do I need download, when I already receive an e-mail or Activity Note into my agency management system that tells me there is a claim?”

Real-time claim inquiry has been a great enhancement for agents and will continue to be so for up-to-the-minute information. But, it is only beneficial if the agent knows the claim has taken place! Further, real-time claim inquiry does not populate the agency management system’s database, and so the agent must enter the claims information into his or her system.

E-mails or Activity Notes are also great “incremental” steps, but again, the agent has to enter the claim into the agency management system and update the information as the status of the claim changes.

The goal is for all of the latest features of technology to work hand-in-hand to make the claims process as streamlined as possible.

Claims Download Critical in Disaster Situations

The horrific storm seasons we have had in recent years provide an instructive example as to how claims download can help agencies. If an agent has had no power and has had clients reporting claims directly to the carrier, how does he or she know what claims have been filed? Once the agency finds out about the claims, who is going to enter the hundreds or thousands of claims into its agency management system? Who is going to update the status on each of the claims, as it is paid or closed? The agency’s employees are already working overtime under terrific stress, and they want the needed claims information to be handy in their system. They want to spend their limited time assisting their clients regarding the claim and demonstrating the value added that their agency provides to its clients. The last thing these employees want to spend hours upon hours doing is entering all of this claims information into their system.

Claims download allows for all of the claims to be:

- automatically entered into the agency management system
- updated as the status is changed, and
- closed when the carrier closes it.

Claims download would save the typical agency hundreds of hours per year, as well as enable agency employees to provide better service to their clients should a claim occur.

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Recommended Claims Workflow

The question, then, is how do claims download, real-time claims inquiries and e-mail or Activity Notes work most efficiently together? Consider the following workflow:

1. The claim is reported directly to the carrier by the client (FNOL reported by the agent is a different workflow and is addressed below.).
2. An e-mail message or Activity Note is sent to the agency instantly notifying it of the loss.
3. Overnight, the claims are processed via a batch process and downloaded into the agency management system.
4. A log is waiting for the agent in the morning, when he or she comes in to review what was attached (similar to policy download) and what went to suspense to be attached.
5. The claim is now in the agency management system and is ready to be serviced.
6. Claim inquiry can be used at this point to look at anything that has transpired during the current day, if necessary. An example would be that the adjuster had not been assigned when the claim was downloaded, and you need to get that information today.
7. Any updates to the claim will download each night (or at given intervals during the day, if the carrier and vendor provide this feature). Again, this download information will populate a log for review.
8. The agency is now in the position to run reports from the agency management system to track losses.

First Notice of Loss (FNOL) Claim Reporting

Another very important technology for agencies is real-time FNOL claim reporting, where the agent can submit the claim to the carrier and instantly get back the claim number and adjuster for the claim. What a terrific service to be able to provide the client with this information on the spot! Even where the agent is using real-time FNOL, however, claims download still plays an important role, because it allows for the automatic updating of the status of the claim, including payments made, adjuster notes, and the closure of the file.

Real-Time Loss Runs

Requesting loss runs through the agency management system and receiving them back in Real Time from the carrier is another significant improvement for agents, providing clients with immediate service and saving considerable time for the agent.

Agents Play Key Role

Whether we are talking about claims download or real-time claim inquiry, FNOL, loss

runs, or Activity Notes, agents will play the critical role in making these improved workflows a reality within our industry. Agents should advocate for these improvements with their carriers, and then “walk the walk” by implementing them within their agencies when they are introduced by particular carriers. High agency usage will be the dominant factor in convincing additional carriers to leave the sidelines and join the game by implementing these new capabilities.

The Future

As exciting as these new technologies are, the future will require the industry to take yet another step, and that is to permit the agency’s clients to access their claims information directly from the agency’s website. Claims download and real-time claims inquiry will provide the foundation for this enhanced consumer capability. Consider once again what this would mean to an agency devastated by a disaster, struggling to make or receive phone calls of any kind. What a godsend it would be if anxious clients could go to the agency’s website and learn that their claim has been received and is in processing, and receive the assigned adjuster’s contact information. Organizations like ACT will continue to work with carriers and vendors to make this future a reality.

Most important today, agents, carriers, and vendors should continue to collaborate to harness the exciting technologies that are available to us now to significantly improve the overall customer experience and to make our distribution system more efficient and responsive.

About the Author:

Donna LaGoy is a Client Partner of Applied Systems, Inc. and is Chair of the ACORD Claims Download Working Group. Before taking her current role, Donna was an independent agent, with many years of experience working for a national broker and then owning her own agency. She is dedicated to improving the technologies and workflows available to independent agents and brokers, both internally and with their insurance carriers. She has been deeply involved in ACT, AUGIE, ACORD, and ASCnet. Donna LaGoy can be reached at dlagoy@appliedsystems.com She prepared this updated article for the Agents Council for Technology (ACT) which is part of the Independent Insurance Agents & Brokers of America. For more information about ACT, contact Ron Berg, ACT’s incoming Executive Director, who can be reached at ron.berg@iiaaba.net. This article reflects the views of the author and should not be construed as an official statement by ACT.

March 27 | 9:30am - 6pm
Insurance Day 2014
at the Capitol



Insurance Day 2014
at the Capitol

This year the MIIAB will be joining with other major insurance organizations to conduct an "Insurance Day at the Capitol". The date for the all industry event is March 27, 2014 and will be held at the Saint Paul RiverCentre, 175 West Kellogg Blvd. See agenda and event announcement for specific details.

We will kick off the day with a presentation by Governor Dayton's former chief of staff and recently announced candidate for Lt. Governor, Tina Smith. Our luncheon speaker will be Tom Hauser, chief political reporter for KSTP news.

In the past, the association has been one of several co-sponsors of the "Business Day on the Hill" that is organized by the Minnesota Chamber of Commerce. The MIIAB Board thought it would be more effective this year to join with the Minnesota Insurance and Financial Services Council, the National Association of Insurance and Financial Advisers and the Minnesota Association Health Underwriters to conduct an insurance day at the capitol. This way the attendees can focus on key insurance issues like access to MVRs, insurance fraud, no-fault reform and health insurance. Also, this event is **free of charge**.

Please join your industry colleagues as we descend on the state capitol. You can register for the March 27 Insurance Day at the Capitol at the following web site:

<http://locklaw.com/insuranceday>





Insurance Day 2014
at the Capitol

March 27 | 9:30am - 6pm **Insurance Day 2014** *at the Capitol*

Saint Paul RiverCentre, 175 West Kellogg Blvd., St. Paul, MN 55102

Minnesota State Capitol, 75 Rev. Dr. Martin Luther King Jr. Blvd., St. Paul, MN 55155

- 9:15-10:00 **Light breakfast, advocacy training for first-time attendees**
- 10:00-10:20 **Welcome**
Tina Flint Smith
Candidate for Lieutenant Governor, former Governor Mark Dayton Chief of Staff
- 10:20-10:30 **Break**
- 10:30-11:15 **Informational Sessions**
#1 Life and health issues
#2 Property and casualty issues
#3 Fraternal benefit societies
- 11:15-11:30 **Break**
- 11:30-12:45 **Lunch and discussion**
Tom Hauser
Chief Political Reporter, 5 EYEWITNESS NEWS
- 12:45-1:00 **Load buses, travel to capitol**
- 1:15-4:00 **Meetings with legislators, alternative sessions with public policy makers**
Minnesota State Capitol, room 318
Minnesota State Office Building, room 500N
- 4:00-4:30 **Load buses, travel to reception site**
State Office Building main entrance
- 4:30-6:00 **Insurance Day 2014 reception**
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Capitol



MN Independent Insurance
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Notes



THE LEGISLATIVE AND POLITICAL NEWSLETTER OF THE
MN INDEPENDENT INSURANCE AGENTS & BROKERS ASSOCIATION

DPS Issues Another MVR Reprieve Until May 12

As more and more people, including state legislators are made aware of the Minnesota Department of Public Safety changes to accessing driver license and motor vehicle records, the Dayton Administration may be rethinking their proposed elimination of batch record access. In the meantime, DPS has pushed back the date for the elimination of bulk data and requirements for state contracts to access multiple MVRs. The date for that action has been moved to May 12, 2014.

DPS and the Governor's office are reviewing their goal of protecting driver personal information from unauthorized access. They are weighing their concerns about privacy protection with the time frames for access to this data and cost-benefit of subscription services. Clearly, we now have their attention.

Local media reports have help elevate this issue with the public. Every legislator, with whom I spoke, was not aware of the change in driving record access. Many legislators have expressed an interest in reviewing this department decision. One legislator has already called for hearings on the issue when the legislature convenes next week.

See this story on KSTP television:

<http://kstp.com/news/stories/S3325025.shtml?cat=1>

The MIIAB will continue to work in conjunction with other affected parties to advocate for continuation of the current system. This system has served the public and agents well and we are still not aware of any breaches related to this data that would require this expansive action.



Dominic Sposeto
MIIAB Lobbyist

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Reply in Haste, Repent at Leisure: Responding to Regulatory Complaints

By Richard F. Lund, JD

The Swiss Re Corporate Solutions underwriting and claims departments frequently hear about comments from our insureds that go something like this: "I just had a bogus complaint filed against me with the Department of Insurance, but I don't want to report it to my E&O carrier. They might consider it a claim even though nothing will ever come of this. It's not really a "claim" anyway. They might take some sort of underwriting action against me or even cancel my policy. After all, I didn't do anything wrong! I'll just respond myself."

While it is impossible to address every possible situation that might occur in this discussion, let's look at a very simple example: A customer of the agency has a claim, the carrier refuses (validly or not) to pay the claim, the customer becomes upset and ultimately files a complaint against the agent or agency with the Department of Insurance. The complaint is delivered to the agency along with a letter from the DOI investigator advising the agent that they have 10 days to file a response to the complaint. The agent is immediately upset, angry, defensive and ready to fire off a scathing reply – one that he may regret once he cools off. Which of the following should the agency choose?

1. Ignore the DOI letter because he did nothing wrong.
2. Send a strongly worded response disparaging the customer, the investigator, the carrier, and every other entity involved indicating how the system is clearly against them.
3. Contact their E&O Carrier to help them respond to the complaint and the letter from the investigator.

If you chose #3, congratulations! You have read and understand the terms of your Westport Insurance Corporation Insurance Industry Professional Liability policy. If you chose #1 or #2, maybe it's time for a refresher course.

The Westport Insurance Corporation Insurance Industry Professional Liability Preferred Policy provides coverage to respond to complaints filed with the state department of insurance under Section I. Coverage D. Additional Coverages 4. Regulatory Defense, and states as follows:

"4. **REGULATORY DEFENSE.** We will pay on behalf of the INSURED, CLAIM EXPENSES caused by WRONGFUL ACTS committed by an INSURED in connection with your insurance operations, arising

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from the following:

Responding to a complaint or defending an investigation brought by any state regulatory agency, insurance department, or other government agency arising from your insurance operation. INSUREDS must:

- a. provide prompt written notice to us and obtain our written consent before responding; and
- b. agree to the use of legal counsel that we choose or approve.

This coverage does not apply to salaries of your personnel, loss of income, fines, penalties, return of fees or commissions, or reimbursement of premiums. The most we will pay under this additional coverage is \$25,000 per POLICY PERIOD for CLAIM EXPENSES and such shall be a part of, and not in addition to, the Limit of Liability shown in the Declarations. "

While each of the capitalized terms is specifically defined in the policy, the most important language in the present context is the phrase: "Responding to a complaint or defending an investigation brought by any state regulatory agency, insurance department, or other government agency arising from your insurance operation." So, if you receive a letter and complaint from a regulatory agency such as the DOI, you should IMMEDIATELY contact your association's E&O administrator or contact the Swiss Re Corporate Solutions claims department. In virtually every case the investigator provides a very short time period to respond, sometimes as little as 10 days, so it is imperative that you report this AS SOON AS POSSIBLE! This will allow time for your claim handler to discuss the allegations with you, gather relevant documentation, retain counsel if it is deemed necessary, and craft a calm, factual, well-reasoned reply. Swiss Re Corporate Solutions has arranged, in most circumstances, to engage the services of an attorney that has had extensive dealings with the DOI and is well versed in their operations. In many situations where the complaint has been made against the agent and that attorney's services have been engaged, the complaint is either dismissed or resolved in favor of the agent.

Another reason that the complaint may be filed with the DOI is because the person who has filed the complaint has already retained an attorney, and their attorney has instructed them to file the complaint to help them on what's called a "fishing expedition". By filing the complaint, they have invoked the services of the DOI (unbeknownst to the DOI) to obtain information from the agent *without anyone knowing an attorney is involved*. Any information uncovered by the DOI investigator, *including a strongly worded letter that may contain statements made by the agent* that he cannot back up (we've seen that happen) will likely be delivered to the person making the complaint, which ultimately finds its way into the hands of their attorney. Now the claimant's attorney has all the ammunition needed to bring a lawsuit against the agent, regardless of the outcome of the DOI complaint. BUT, if you have followed the terms of your Westport policy and reported this to Swiss Re Corporate Solutions, an informed and measured response can be drafted to protect your interests.

This brings us to the second question of the matter: will I be penalized simply because I reported the DOI complaint to my E&O carrier? If your E&O carrier is Swiss Re Corporate Solutions under the Westport professional liability policy, the answer is no. The mere reporting of a DOI complaint (or any other claim or potential claim for that matter) does not automatically mean that you will have any adverse underwriting action taken by Swiss Re Corporate Solutions. In fact, because your professional liability policy is a *claims made policy*, it is very important that you report each and every claim or potential claim (as defined in the policy) to ensure that coverage can

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be afforded under the policy. Simply reporting them will not, repeat NOT, result in any underwriting action. (Note: an adverse finding by the DOI **may** impact underwriting, depending on severity, but you are obliged to report those decisions anyway.)

Even if an attorney is retained to assist in responding to the complaint, chances are that no adverse underwriting action will be taken. And just as importantly, it may prevent a lawsuit being filed against you!

So, if you receive a letter from the Department of Insurance along with a complaint alleging that you have committed some act that adversely affected the person making the complaint:

1. Calm down
2. Gather your file materials regarding the transaction
3. Report it to your state association E&O administrator or directly to the Swiss Re Corporate Solutions claims department
4. Follow the advice and instructions of the claims person or attorney retained to represent you to respond to the complaint
5. Take comfort in the fact that your interests are being protected

If you follow these simple steps, you will maximize your chances of successfully defending yourself against a Department of Insurance complaint.

This article is intended to be used for general informational purposes only and is not to be relied upon or used for any particular purpose. Swiss Re shall not be held responsible in any way for, and specifically disclaims any liability arising out of or in any way connected to, reliance on or use of any of the information contained or referenced in this article. The information contained or referenced in this article is not intended to constitute and should not be considered legal, accounting or professional advice, nor shall it serve as a substitute for the recipient obtaining such advice. The views expressed in this article do not necessarily represent the views of the Swiss Re Group ("Swiss Re") and/or its subsidiaries and/or management and/or shareholders.

**Richard F. Lund, JD, is a Vice President and Senior Underwriter of Swiss Re Corporate Solutions underwriting insurance agent's errors and omissions coverage. He has also been an insurance agents E&O claims counsel and has written and presented numerous E&O risk management/ loss control seminars, mock trials and articles nationwide since 1992.*

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One Hundred Years

What a difference a century makes! Here are some statistics from the year 1914

The average life expectancy for men was 47 years.
Fuel for cars was sold in drug stores only.
Only 14% of the homes had a bathtub.
Only 8 % of the homes had a telephone.
There were only 8,000 cars and only 144 miles of paved roads.
The maximum speed limit in most cities was 10 mph.
The tallest structure in the world was the Eiffel Tower.
The average US wage in 1914 was 22 cents per hour.
The average US worker made between \$200 and \$400 per year.
A competent accountant could expect to earn \$2000 per year.
A dentist earned \$2,500 per year.
A veterinarian earned \$4,000 per year.
A mechanical engineer \$5,000 per year.
95% of all births took place at HOME.
90% of all doctors had NO COLLEGE EDUCATION!
18% of households had at least one full-time servant or domestic help.
Only 6% of Americans had graduated from high school.
Only 14% of the homes had a bathtub.
Only 8 % of the homes had a telephone.
Sugar cost 4 cents a pound.
Eggs were 14 cents a dozen.
Coffee was 15 cents a pound.
Women washed their hair once a month, using egg yolks for shampoo.
There was no such thing as deodorant or tooth paste.
The five leading causes of death were:

1. Pneumonia and Influenza
2. Tuberculosis
3. Diarrhea
4. Heart disease
5. Stroke

The American Flag had 45 stars.
The population of Las Vegas was only 30.
Crossword puzzles, canned beer, and iced tea hadn't been invented yet.
There was no Mother's Day or Father's Day.
There were about 230 reported murders in the ENTIRE USA.
The Insurance Federation of Minnesota was formed.

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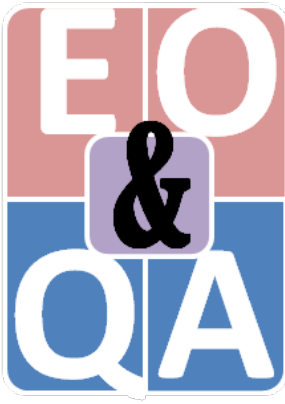


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Agent's questions about Errors and Omissions, and how E&O losses can be prevented.

By Mary LaPorte, CPCU,
CIC, LIC, CPIA

Q: Does using professional designations or letters behind our names create more E&O exposure?
Jon, Minnesota

A: Jon, this has been a question raised by many insurance professionals upon receiving a new designation: *"Now that I have a designation, should I be afraid to use it?"*

Let's all agree, it is not always easy to obtain a designation. I think part of the answer may lie in why we obtained the designation in the first place. For most of us, it was a challenge of personal growth, wanting to be the best we can be. It may also have been a desire to elevate our performance and knowledge, thereby creating more opportunities for increased income. (Nothing wrong with that). But I think many would agree that one of the reasons we pursued a designation was to learn all we could in order to do a better job for our clients. We wanted to be in a better position to answer their questions, and to help them find the best insurance and risk management solutions. Regardless of the motivation, the result was that we ended up with more knowledge and professionalism.

So, it is not surprising that when someone is faced with an E&O claim, the opposing side will argue that their knowledge and education have created a higher expectation of their performance. The real question is: Did they use their professional designation to influence the customer to expect more from them than from an agent without the designation? If so, then their actions may have actually "raised the bar" on their performance.

Some agents will use their designation in advertising, and brag that the designation makes them a better agent. Some will include a page in their proposal and imply that the designation means that a customer will be better protected. In cases such as these, the agent or agency has raised the bar on themselves, and on the customer's expectation. This is certain to be a consideration in an E&O claim against that agent or agency. Agencies should avoid this type of advertising or any exaggeration of expertise and knowledge.

There is good reason to be proud of obtaining your designation. Hang that framed certificate in your office, and post an announcement in the local newspaper or Chamber of Commerce news. It is appropriate to use the designation letters behind your name in correspondence and business cards. When asked by others, explain what the designation means and stands for. Some designation programs even offer brochures which you can hand out. However, common sense would dictate that including a brochure about your professional designation in a proposal for insurance coverage might raise the customer's expectation in a sales transaction.

There is one other side to this designation discussion, and that is the agent who knowingly creates a higher expectation because they truly believe that their knowledge and expertise should hold them to a higher standard. If that agent is exceptional in the service provided to their clients, they are probably also taking above average steps to avoid E&O exposure. That doesn't mean that they are invulnerable to an E&O claim. Those agents need to recognize that in reality, they probably will be held to a higher standard and need to be prepared to address their actions at that level.

Be proud of your designation and don't be afraid to use the letters behind your name. But temper that pride with the reality that the way you use the designation could raise a customer's expectations.

*Mary LaPorte is a consultant and educator with a strong background in Errors & Omissions loss prevention. Forward your E&O questions to marylp@lpinsuranceconsult.com
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Named Insureds, Insureds & Additional Insureds

It is time for another review, based on questions and comments that I have received in the past several months. This month we will look at the “Who is an Insured” part of our General Liability policies.

In the 1984-85 revision of the ISO General Liability policy, the concept of the “**First Named Insured**” was introduced. Since then, all the various insurance policies have been changed to recognize this new idea. In the “old” days, if the Named Insured on the policy was a couple of paragraphs long, and had 46 different names and entities, each one of those names and entities had to be sent a registered letter concerning a cancellation or non-renewal situation. The First Named Insured concept changed that, and ISO built this change in the Common Policy Conditions, giving the First Named Insured the sole authority to act for and on behalf of all other insureds. Now the cancellation and non-renewal notices need only be given to the First Named Insured.

The First Named Insured does **NOT** have broader coverage than the other Named Insureds. But the First Named Insured has more rights:

1. To change the policy;
2. To cancel the policy;
3. To receive notice of cancellation or non-renewal;
4. To receive any return premiums.

The First Named Insured also has obligations:

1. To pay the premium;
2. To maintain records.

A Named Insured can be: an individual (a sole proprietorship), a partnership, a joint venture, a limited liability company, a corporation or a trust.

Others who may be **automatically included** in the General Liability policy and considered to be “**Insureds**”:

1. Partners in a partnership;
2. Members of a joint venture;
3. Members and managers of a limited liability company;
4. Executive officers, directors and stockholders of a corporation;
5. Trustees of a trust;
6. Employees;



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7. Volunteer workers;
8. Permissive users of mobile equipment;
9. Any others who could be legally responsible for the use of mobile equipment;
10. Other persons acting as your real estate manager, or who have temporary custody of your property if you die, or who are your legal representative if you die.

Coverage for the insureds listed above is usually restricted: **“but only with respect to their duties as..”**; or **“but only with respect to the conduct of your business..”** or **“using with your permission”**. Also, it makes a difference in coverage if the employee is a “temporary worker” or a “leased worker”.

A note here about newly acquired or formed organizations (assuming a majority interest): these are covered for 90 days only. Another statement of restriction of coverage: **“No person or organization is an insured with respect to the conduct of any current or past partnership, joint venture or limited liability company not shown as a Named Insured in the Declarations”**.

Then there are Additional Insureds to be considered. The first question to consider is why some one (or entity) would want to be an additional insured. Here are some possible reasons:

1. Some one hired the named insured to perform work;
2. Some one enters into a contract with the named insured;
3. Some one rents or leases property to the named insured;
4. Some one buys from the named insured;
5. Some one represents the named insured;
6. Some one is a creditor of the named insured.

Additional insureds are **always** added by an endorsement. The reason that the Named Insured wants to do this is to satisfy some obligation assumed in a contract (see the 6 reasons above).

Coverage for Additional Insureds is the same as for the Named Insureds (including the First Named Insured; remember the coverage is the same, but the First Named Insured has more rights and obligations). The policy will provide a defense, pay for supplementary payments and pay for judgments/settlements. Being an Additional Insured also removes the right of the Named Insured’s insurance carrier to subrogate against them.

Some final considerations about Additional Insureds:

1. All policy exclusions apply unless there is an exception in the Additional Insured endorsement.
2. There often are additional exceptions or exclusions in the Additional Insured endorsements.
3. Coverage in the Additional Insured endorsement is provided only for the individual or entity named in the endorsement.

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4. In all ISO Additional Insured endorsements since the July, 2004 edition, the bodily injury or property damage must be caused by the Named Insured or others acting on behalf of the Named Insured. (This is why we say our Additional Insured endorsements only cover **basic** Hold Harmless agreements, and will no longer cover **broad form** agreements in which our client is obliged to pay for the negligence of another).
5. Additional Insured endorsements apply only to the extent permitted by law and will not be broader than that required by any contract or agreement (2013 ISO change). This was done to recognize that many states have now outlawed insuring broad form contracts (like our August 1, 2013 Minnesota statute).
6. The limits provided by the Additional Insured endorsements will be for the **lesser** of: 1) the amount of insurance provided by the endorsement, or 2) for the amount that is required by the contract or agreement that is requiring the Additional Insured endorsement (2013 ISO change). Thus, if the construction contract requires a \$2,000,000 Umbrella limit and the insured has a \$5,000,000 Umbrella limit, the \$2,000,000 limit will apply.



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In The News...

MARCUS KNUTH NAMED ACUITY VICE PRESIDENT



ACUITY has promoted Marcus Knuth to Vice President - Enterprise Technology.

Marcus began his career at ACUITY in May 1992 as a Management Trainee and became Unit Supervisor in Services later that year. Two years later, he was named Procedures Analyst, and he was promoted to Senior Procedures Analyst in 1996.

In 1998, Marcus received the title Business Consultant, and he was subsequently promoted to Senior Business Consultant in 2001. The following year, he was named Director of Information Technology. In 2006, he was promoted to Area Manager - Information Systems.

Marcus earned bachelor's degrees in computer science from Lakeland College and in finance from the University of Wisconsin-Whitewater.

SECURA HONORS 2013 TOP-PERFORMING AGENCIES

SECURA Insurance announced its top-performing agencies for 2013. To earn this prestigious recognition, these independent agencies met specific criteria based on their premium volume, profitability, growth, retention, and loss history with the super-regional insurance carrier.

The Charles L. Crane Agency Company, from St. Louis, Mo., and Indianhead Insurance Agency, Inc., from Eau Claire, Wis., were named the Top-Performing Agencies for 2013.

Having represented SECURA for 20 years, this is the Crane Agency's sixth time earning a top-performer award from the company. Tom Berra, Broker; and Mike Reedy, President; were on hand to accept the award at a ceremony in January at the company's annual Premier Agent Professional Development Conference.

Indianhead has partnered with the carrier for 37 years, and this is the agency's eighth time winning a top-performer award. Toby Dutter, Owner; and Craig Jameson, COO; accepted the award at the

conference.

These independent agencies also received top-performing agency awards:

- Beth & Rudnicki Insurance Agency, Inc., Rockford, Ill., is a first-time award recipient and has represented SECURA since 2000.
- Continental Insurance Agency, Glenwood Springs, Colo., is a first-time award recipient and has represented SECURA since 2008.
- The McClone Agency, Inc., Menasha, Wis., is a four-time award recipient and has represented SECURA since 1976.
- Schwarz Insurance Agency, Inc., Prairie du Sac, Wis., is a first-time award recipient and has represented SECURA since 1982.

In addition, the carrier recognized The Maguire Agency from St. Paul, Minn., as its Rookie of the Year. The agency has worked with the insurance company for 12 years.

"I'm proud to celebrate the strength of our key agent partners," said John Bykowski, SECURA's CEO. "Each of these agencies has shown their dedication to our company, and I truly value their partnership, knowing it will lead to continued success in the future."

INTEGRITY INSURANCE NAMES DREW WINEGAR AS AUTO LIABILITY CLAIMS MANAGER



Integrity Insurance named Drew Winegar as the new auto liability claims manager.

In this position, Winegar is responsible for supervising the auto liability claims representatives, managing day-to-day operations within the department and reinforcing the company's strategic focus of delivering outstanding customer service.

Winegar brings over nine years of claims experience to his new role, with a multi-line background in claims, holding positions as a claims associate, appraiser and most recently a material damage and bodily injury manager.

"We are excited to have Drew join our team. His background in claims handling and management will complement our current efforts and enhance the service we provide," said Christian Martin, vice president of claims for Integrity Insurance.

Originally from Maquoketa, Iowa, Winegar earned his bachelor's degree in Journalism and Mass Communication at the University of Iowa in Iowa City. He has also earned his Associate in Claims AIC designation.

ACUITY RELEASES 2013 FINANCIAL STATEMENT, FINISHES YEAR WITH 92.4 COMBINED RATIO

ACUITY released its 2013 Financial Statement, which details the insurer's profitability, strength, and stability. ACUITY's financial results shattered company records in several areas and surpassed peer companies in the insurance industry's most important measurements of performance.

Highlighting ACUITY's 2013 financial results is a 92.4 combined ratio, a 1.8-point improvement over 2012 and nearly 10 points better than the insurer's competitors in the property/casualty industry.

"Achieving an incredible 92.4 combined ratio shows that ACUITY is doing things right," said Ben Salzmann, ACUITY President and CEO. "We are writing more business with independent agents, who recently named ACUITY the easiest company to do business with. We are also continuing to exercise underwriting and pricing discipline to achieve consistent profitability."

ACUITY's Financial Statement showed other areas of continued strength as well. Assets under management increased by more than 12 percent to reach an all-time high of nearly \$3.1 billion, and policyholders' surplus increased by 14.5 percent to finish at nearly \$1.3 billion, also an all-time record.

2013 marked the third straight year that ACUITY's combined ratio finished below 100, and the company has averaged a 95.4 combined since 2000. Additionally, ACUITY maintained a leverage ratio under 1:1 for the fifth consecutive year, finishing 2013 with an incredibly strong 0.89:1.

ACUITY also combined financial performance with sales growth that was balanced between personal and commercial lines. Companywide,

ACUITY increased its written premium by 14.4 percent and has averaged double-digit annual sales growth since 2000.

"ACUITY is positioned for continued growth and profitability," Salzmann said. "We have the agents, staff, technology, and financial stability to sustain our momentum into 2014 and beyond."

SFM RANKS FIRST IN PROMPT ACTION ON CLAIMS

SFM once again topped the Minnesota Department of Labor and Industry's list for prompt action on lost-time claims among large insurers.

For the 15th consecutive year, SFM responded on time to a higher percentage of lost-time claims in fiscal year 2013 than any other insurer with more than 1,000 claims.

SFM had 1,822 Minnesota claims during the 12-month period, according to the report, which shows the percentage of lost-time claims that were either accepted or denied within the 14-day period allowed by Minnesota statute.

SFM claims representatives' responsiveness helps control claim costs. To ensure prompt action, SFM asks employers to report work injuries within 24 hours.

INTEGRITY INSURANCE NAMED IN DEEP CUSTOMER CONNECTIONS' TOP TEN RANKING

Integrity Insurance ranked ninth out of 200 carriers in Deep Customer Connections, Inc.' 11th annual survey. Specifically, more than 7,000 agents rated over 200 property and casualty carriers they do business with based on 11 unique performance factors that determine an agent's ease-of-doing-business experience.

"Our aggressive service standards and focus on redefining partnership in the marketplace provide Integrity Insurance with the foundation to be a top performer," said Integrity President Jill Wagner. "We put a priority on building strong partnerships with our agents and are pleased that our efforts are reflected in Deep Customer Connections Top Ten ranking."

Deep Customer Connections specializes in research and consulting to give property and casualty carriers metrics on how easy it is for agents to write business with them.

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Expert Advice: Sometimes you need answers to questions that can't be found in the research library. To help with these "just in time" issues, we have assembled a faculty of leading experts from around the country. Big "I" Members can submit questions to our "Ask an Expert" service and a response is usually sent within 3-5 business days, but often sooner.

All of this can be accessed on the web at

www.independentagent.com/vu



Big "I" FLOOD

In, Above and Outside of the NFIP!

2014 Flood Seminar

March 18, 2014 - Eden Prairie

Prairie Conference Center
7500 Flying Cloud Drive, Ste 125
Eden Prairie, MN 55344
763-235-6460

March 19, 2014 - Rochester

Ramada Hotel & Conference Ctr
1517 16th St SW
Rochester, MN 55902
800-552-7224

March 20, 2014 - Detroit Lakes

Holiday Inn on the Lake
1155 Hwy 10 E
Detroit Lakes, MN 56501
218-847-2121

FEMA and continuing education sponsors are developing courses related to the NFIP. An insurance producer who sells flood insurance policies through the NFIP can satisfy the minimum training and education requirements established by FEMA by completing an accredited course related to the NFIP, which will be approved for three credit hours of continuing education credit by the Minnesota Department of Commerce. The failure to comply with the minimum training and education requirements established by FEMA may jeopardize the insurance producer's authority to sell flood insurance policies through the NFIP.

THIS COURSE HAVE BEEN APPROVED BY THE MN COMMISSIONER OF COMMERCE FOR 3 HOURS OF INSURANCE CONTINUING EDUCATION

Cost

\$70 Members
\$85 Non-Members

ADDITIONAL NON-REFUNDABLE CHARGE OF \$2 PER PERSON WILL APPLY FOR CREDIT CARD TRANSACTIONS

Registration Information

8:30a.m. - 9:00a.m. Sign in
9:00a.m. - 12:00p.m. Seminar

Method of Payment

Check Enclosed (Payable to MIIAB) or Charge to: VISA Mastercard

CANCELLATION POLICY: Registration fee is fully refundable if cancellation is received seven days prior to class. A \$30.00 fee will be charged for cancellations less than seven days before the scheduled class. NO SHOWS will NOT receive a refund.

In accordance with Title III of the American with Disabilities Act, we invite all registrants to advise us of any disability and any request for accommodation to that disability. Please submit your request as far as possible in advance of the program you wish to attend

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Name _____ MN Insurance License # _____ Email _____

Agency/Company _____ Phone _____

Address _____ City _____ State _____ Zip _____

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www.miia.org



MIIAB is now sponsoring the **Certified Risk Managers Designation**

The Certified Risk Managers (CRM) designation demonstrates that you are knowledgeable in all areas of managing risks, hazards, and exposures.

The courses provide you with an in-depth knowledge about today's highest priorities – identifying, analyzing, controlling, financing, and administering operational risks – as well as political risks, catastrophic loss exposures, third-party exposures, fiduciary exposures, employee injury exposures, juridical risks, legal risks, and more – whether insurable or not. The skills you learn will make you more proactive and valuable to your organization in discovering how risks can interrupt the flow of earnings and how to protect against it.

The five CRM courses are:

Principles of Risk Management

Analysis of Risk

Control of Risk

Financing of Risk

Practice of Risk Management

Each course is 2-½ days of instruction, followed by an optional exam. Any eligible individual may attend classes without taking the examinations or working toward the designation.

For more info and to register follow this link:

<https://www.scic.com/courses/CRM#>

CRM Control of Risk

June 24-27, 2014 Eden Prairie, MN

Risk control is a core aspect of risk management. This course will make you proficient in all the risk control essentials, including safety, alternative dispute resolution, employment practices liability, and crisis management.

CRM Analysis of Risk

December 2-5, 2014 Eden Prairie, MN

You'll acquire rock-solid expertise in the analysis and measurement of exposures and loss data that is fundamental to risk management. We recommend that you take Analysis of Risk before embarking on the Financing of Risk course, in order to build on your growing knowledge in the most effective possible way.



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2014 MIIAB CIC Program Schedule

It's easy to register by fax, phone, mail, or on-line!

EXAMS NOW ON FRIDAY!

Please select Seminar date

- 1/15 - 1/17/14 **Eden Prairie** Commercial Casualty
- 2/12 - 2/13/14 **Plymouth** *Ruble Graduate Seminar
- 3/5 - 3/7/14 **Eden Prairie** Agency Management
- 4/9 - 4/11/14 **Eden Prairie** Personal Lines
- 5/21 - 5/23/14 **Eden Prairie** Commercial Property
- 6/11 - 6/13/14 **Brainerd** Life & Health
- 7/16 - 7/18/14 **Eden Prairie** Personal Lines
- 8/6 - 8/8/14 **Eden Prairie** Commercial Casualty
- 9/10 - 9/11/14 **Plymouth** *Ruble Graduate Seminar
- 10/8 - 10/10/14 **Eden Prairie** Agency Management
- 11/5 - 11/7/14 **Eden Prairie** Commercial Property

* Must be a dues paid member of CIC or CRM to attend a Ruble Graduate Seminar

Dates and locations are subject to change. Before making any travel arrangements, call to verify the dates, location, start time and availability when registering for a program.

Method of Payment

Check Enclosed (Payable to MIIAB) or Charge to: VISA Mastercard

(Additional non-refundable charge of \$15 will apply per seminar for credit card transactions)

In accordance with Title III of the American with Disabilities Act, we invite all registrants to advise us of any disability and any request for accommodation to that disability. Please submit your request as far as possible in advance of the program you wish to attend

All courses begin Wednesdays at 8:00 a.m., Thursdays from 8:00 a.m. until 5:00 p.m., and Fridays from 8:00 a.m. to 12:00 p.m.
 Optional Exam: **Friday** 2:00 p.m. to 4:00 p.m.
NOTE: Ruble Graduate Seminars only meet Wednesdays and Thursdays from 8:00 a.m. until 5:15 p.m. & there is no exam.

Important Information
 All participants must present photo identification to the on-site registrar at the institute. Cancellations received within 7 calendar days of a program will incur a \$75 non-refundable fee. If you do not cancel and do not attend the program, you will incur a \$125 fee. The balance of the registration fee may be refunded or transferred to another course. You may substitute an eligible person for the same event anytime at no charge with notification prior to the course.

These courses have been submitted for approval to the MN Commissioner of Commerce for **20 hours of Insurance continuing education**. Except for Ruble Graduate Seminar that are only **16 hours**.

Cost	Seminar
\$430.00	CIC Institutes (20 Hours)
\$420.00	Ruble Graduate Seminar (16 Hours)

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**2014 MIIAB CISR
Program Schedule**

Please select Seminar date - These courses have been approved by the
MN Commissioner of Commerce for 7 hours of Insurance continuing education

- 1/7/14 - Eden Prairie Personal Lines Miscellaneous
- 1/23/14 - Shoreview Agency Operations
- 2/5/14 - Eden Prairie Commercial Casualty I
- 2/6/14 - St. Cloud Commercial Casualty I
- 2/11/14 - Duluth Commercial Property
- 3/4/14 - Shoreview Personal Lines Miscellaneous
- 3/11/14 - Rochester Commercial Property
- 3/12/14 - Eden Prairie Agency Operations
- 4/8/14 - St. Cloud WTH - Personal Lines
- 4/15/14 - Eden Prairie Personal Auto
- 5/6/14 - Eden Prairie Commercial Property
- 5/14/14 - Rochester Elements of Risk Management
- 5/15/14 - Duluth Personal Residential
- 5/20/14 - Grand Rapids Commercial Casualty II
- 6/5/14 - Brainerd Agency Operations
- 6/10/14 - Eden Prairie WTH - Personal Lines
- 6/11/14 - Shoreview Commercial Casualty II
- 6/17/14 - Thief River Falls Personal Auto
- 7/10/14 - Eden Prairie Elements of Risk Management
- 7/15/14 - Alexandria Commercial Property
- 7/22/14 - Mankato Commercial Property
- 7/23/14 - Detroit Lakes Personal Lines Miscellaneous
- 8/5/14 - Rochester Personal Lines Miscellaneous
- 8/12/14 - Eden Prairie Commercial Casualty II
- 8/12/14 - Willmar Agency Operations
- 8/21/14 - Bemidji Commercial Casualty I
- 9/9/14 - St. Cloud Commercial Casualty II
- 9/16/14 - Duluth Elements of Risk Management
- 9/23/14 - Eden Prairie Personal Residential
- 10/2/14 - Shoreview WTH - Personal Lines
- 10/14/14 - Eden Prairie Dynamics of Service
- 10/15/14 - Rochester Dynamics of Service
- 11/11/14 - St. Cloud Personal Residential
- 11/18/14 - Mankato Personal Lines Miscellaneous
- 12/9/14 - Eden Prairie Personal Lines Miscellaneous

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CANCELLATION POLICY: Registration fee is fully refundable if cancellation is received seven days prior to class. A \$30.00 fee will be charged for cancellations less than seven days before the scheduled class. NO SHOWS will NOT receive a refund.

In accordance with Title III of the American with Disabilities Act, we invite all registrants to advise us of any disability and any request for accommodation to that disability. Please submit your request as far as possible in advance of the program you wish to attend

Cost	Seminar	Time
\$158.00	CISR Seminar	8:00am-3:45pm Test: 4:15-5:15pm
\$168.00	William T. Hold Seminar (WTH)	8:00am-4:00pm
\$158.00	Dynamics of Service	8:00am-5:00pm

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2014 MIIAB E&O Risk Management: Meeting the Challenges of Change



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These courses have been approved by the MN Commissioner of
Commerce for 6 hours of Insurance continuing education.

Please Check Location

- 1/22/14 - Eden Prairie** 8:30am-3:30pm
Prairie Conference Center
7500 Flying Cloud Dr, Ste 125
Eden Prairie, MN 55344
952.835.4180
- 3/25/14 - St. Cloud** 8:30am-3:30pm
Best Western Kelly Inn
Hwy 23 & 4th Ave
St. Cloud, MN 56301
320.253.0606
- 4/15/14 - Fergus Falls** 8:30am-3:30pm
Best Western/Bigwoods Event Center
925 Western Ave
Fergus Falls, MN 56537
800.293.2216
- 5/1/14 - MIIAB Convention** 8:30am-3:30pm
Minneapolis Convention Center
1301 2nd Ave S
Minneapolis, MN 55403
612.335.6000
- 6/19/14 - Morton** 8:30am-3:30pm
Jackpot Junction
39375 County Hwy 24
Morton, MN 56270
507.644.3000
- 7/9/14 - Walker** 8:30am-3:30pm
Northern Lights Casino
6800 Y. Frontage Rd NW
Walker, MN 56484
866.652.4683
- 8/19/14 - Rochester** 8:30am-3:30pm
Ramada Hotel & Conference Ctr
1517 16th St SW
Rochester, MN 55902
507.289.8866
- 9/17/14 - Duluth** 8:30am-3:30pm
Holiday Inn & Suites
200 West First St.
Duluth, MN 55802
218.727.7492
- 10/22/14 - Eden Prairie** 8:30am-3:30pm
Prairie Conference Center
7500 Flying Cloud Dr, Ste 125
Eden Prairie, MN 55344
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AGENCY STAFF SIZE	TOTAL ATTENDEES REQUIRED AT A (6 HOUR) SEMINAR	POSITION IN AGENCY	PLUS ADDITIONAL REQUIREMENTS
1	1	ACTIVE AGENCY PRINCIPAL, OWNER, PARTNER OR OFFICER	NONE
2-7	2	ACTIVE AGENCY PRINCIPAL, OWNER, PARTNER OR OFFICER	ONE PRODUCER OR CSR
8-20	4	ACTIVE AGENCY PRINCIPAL, OWNER, PARTNER, OFFICER AND ONE ACTIVE AGENCY PRINCIPAL, OWNER, PARTNER, OFFICER, OPERATIONS MANAGER OR PRODUCER	TWO PRODUCER'S OR CSR'S
21-50	6	ACTIVE AGENCY PRINCIPAL, OWNER, PARTNER, OFFICER AND ONE ACTIVE AGENCY PRINCIPAL, OWNER, PARTNER, OFFICER, OPERATIONS MANAGER OR PRODUCER AND ONE CSR	THREE PRODUCER'S OR CSR'S
51+	10	ACTIVE AGENCY PRINCIPAL, OWNER, PARTNER, OFFICER AND TWO ACTIVE AGENCY PRINCIPAL'S, OWNER'S, PARTNER'S, OFFICER'S, OPERATIONS MANAGER'S OR PRODUCER'S AND TWO CSR'S	FIVE PRODUCER'S OR CSR'S

Cost per person
\$151.00 MIIAB Member Price
\$166.00 Non-Member Price

Agencies that attend this seminar will receive a 10% loss control credit on their Westport E&O Premium. Once an agency attends the seminar the 10% credit will apply for 3 years if the agency remains claim free during the 3 year period.

Method of Payment

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CANCELLATION POLICY: Registration fee is fully refundable if cancellation is received seven days prior to class. A \$30.00 fee will be charged for cancellations less than seven days before the scheduled class. NO SHOWS will NOT receive a refund.

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